## **Marin County Community Development Agency**

Alex Hinds, Director

## ZONING/DEVELOPMENT APPLICATION TYPE OF APPLICATION: PRECISE DEVELOPMENT PLAN REZONING **COASTAL PERMIT** SECOND UNIT USE PERMIT **DESIGN REVIEW** SIGN PERMIT/REVIEW\* MINOR DESIGN REVIEW DESIGN REVIEW CLEARANCE (EXEMPTION) USE PERMIT VARĪĀNCE\* FLOATING HOME EXCEPTION\* TIDELANDS PERMIT GENERAL PLAN/COMMUNITY PLAN AMENDEMENT TREE REMOVAL PERMIT MASTER PLAN \*Requires Supplemental Application/Information TO BE COMPLETED BY PLANNING DEPARTMENT STAFF: FEES: Permit: Received by: Cat. Exempt: Initial Study: \_\_\_\_\_\_ Planner Assigned: Concurrent Application: Other: Reviewing Authority: (Make checks payable to: Marin County Planning Department) Hearing: Non-Hearing: Application No.(s): Assessor's Parcel No.(s): \_\_\_\_ TO BE COMPLETED BY APPLICANT: (Please type or print legibly) Zoning: \_\_\_\_\_ Assessor's Parcel No(s): 1. Project Address: City/Zip: \_\_\_\_\_ 2. Phone: Property Owner: 3. Owner's Address: City/Zip: \_\_\_\_\_ 4. Phone: \_\_\_\_\_ 5. (if different from owner) City/Zip: \_\_\_\_\_ Applicant's Address: 6. All correspondence will be sent to the applicant. Please indicate any others to receive correspondence: 7.

Description of Application: (specifically describe what you wish to accomplish)

Name \_\_\_\_\_

TC	BE COMPLETED BY APPLICANT: (continued)
9.	State of California Hazardous Waste and Substances Sites List (C.G.C. § 65962.5)
	Pursuant to California Government Code Section 65962.5(e), before a local agency accepts as complete an application for any development project, the applicant shall consult the latest State of California Hazardous Waste and Substances Sites List on file with the Planning Department and submit a signed statement indicating whether the project is located on a site which is included on the List.
	Statement: I have consulted the latest State of California Hazardous Waste and Substances List on file with the Planning Department, and I have determined that the project site is / is not (circle one) included on the List.
	Date of List consulted:
	Source of the listing: (To be completed only if the site is included on the List)
SIC	GNATURE:
appreq dee or	ereby certify that I have read this application form and that to the best of my knowledge, the information in this olication form and all the exhibits are complete and accurate. I understand that any misstatement or omission of the uested information or of any information subsequently requested shall be grounds for rejecting the application raming the application incomplete, denying the application, suspending or revoking a permit issued on the basis of these subsequent representations, or for the seeking of such other and further relief as may seem proper to the County of the county
	Signature of Property Owner(s)  Signature of Applicant
	ereby authorize employees of the County of Marin to enter upon the subject property, as necessary to inspect the mises and process this application.
	Signature of Property Owner
	ereby authorize the Planning Department to reproduce plans and exhibits as necessary for the processing of this dication. Multiple signatures are required when plans are prepared by multiple professionals.
	Signature of Property Owner Signature of Plan Preparer
Res	e property involving this permit request may be subject to deed restrictions called Covenants, Conditions and strictions (CC&Rs) which may restrict the property's use and development. These deed restrictions are private elements and are NOT enforced by the County of Marin. Consequently, development standards specified in such deed trictions are NOT considered by the County when granting permits.
asso	a are advised to determine if the property is subject to deed restrictions and if so, contact the appropriate homeowners ociation and adjacent neighbors about your project prior to proceeding with construction. Following this procedure I minimize the potential for disagreement among neighbors and possible litigation.
	Signature of Property Owner
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